

APPLICATION DATA SHEET

Application Information

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?:: None

Computer Readable Form (CRF)?:: No

Number of Copies of CRF::

Title:: CONVERTER CIRCUIT WITH TWO
CONVERTER ELEMENTS

Attorney Docket Number:: 1004501-000847

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 11

Small Entity?:: No

Latin Name::

Variety Denomination Name::

Petition Included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Switzerland

Status:: Full Capacity

Given Name:: Srinivas

Middle Name::

Family Name:: PONNALURI

Name Suffix::

City of Residence:: Untersiggenthal

State or Province of Residence::

Country of Residence:: Switzerland

Street of Mailing Address:: Niederwiesstrasse 12

City of Mailing Address:: Untersiggenthal

State or Province of Mailing
Address::

Country of Mailing Address:: Switzerland

Postal or Zip Code of Mailing Address:: CH-5417

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Switzerland

Status:: Full Capacity

Given Name:: Jürgen

Middle Name::

Family Name:: STEINKE

Name Suffix::

City of Residence:: Albruck

State or Province of Residence::

Country of Residence:: Germany

Street of Mailing Address:: Steigäcker 14

City of Mailing Address:: Albruck

State or Province of Mailing Address::

Country of Mailing Address:: Germany

Postal or Zip Code of Mailing Address:: D-79774

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Switzerland

Status:: Full Capacity

Given Name:: Peter

Middle Name::

Family Name:: STEIMER
Name Suffix::
City of Residence:: Unterehrendingen
State or Province of Residence::
Country of Residence:: Switzerland
Street of Mailing Address:: Schlierenbach 16
City of Mailing Address:: Unterehrendingen
State or Province of Mailing Address::
Country of Mailing Address:: Switzerland
Postal or Zip Code of Mailing Address:: CH-5424

Correspondence Information

Correspondence Customer Number:: **21839**
Phone Number:: 703.836.6620
Fax Number: 703.836.2021

Representative Information

Representative Customer Number:: **21839**

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/CH04/000735	12/13/04

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
Europe	03405899.0	12/16/03	Yes

Assignee Information

Assignee Name::	ABB SCHWEIZ AG
Street of Mailing Address::	Brown Boveri Strasse 6
City of Mailing Address::	Baden
State or Province of Mailing Address::	
Country of Mailing Address::	Switzerland
Postal or Zip Code of Mailing Address::	CH-5400